PTO/SB/06 (07-06) /2007 OMB 0651-0032

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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 10/560,006			ing Date 08/2005	To be Mailed
	AF	PPLICATION A	AS FILE	OTHER THAN SMALL ENTITY □ OR SMALL ENTITY							
⊢	FOR		NUMBER FILED		(Column 2) NUMBER EXTRA		RATE (\$)	FEE (\$)	OK.	RATE (\$)	FEE (\$)
	BASIC FEE (37 CFR 1.16(a), (b),	$\neg$	N/A	LD NO	N/A	ı	N/A	TEE (a)		N/A	TEE (0)
	SEARCH FEE	or (c))	N/A		N/A	ı	N/A			N/A	
H	(37 CFR 1.16(k), (i), (i)		N/A		N/A		N/A			N/A	
	(37 CFR 1.16(o), (p), (AL CLAIMS	or (q))	minus 20 =		, NA		x \$ =		OR	x s =	
IND	CFR 1.16(i)) EPENDENT CLAIM	s	minus 20 = *			ı	x s =		OIL	x s =	
(37	CFR 1.16(h))	If the	If the specification and drawing		re evened 100	ı	A # -			A -	
	APPLICATION SIZE (37 CFR 1.16(s))	FEE shee is \$2 addit	ts of pape 50 (\$125 ional 50 s	n size fee due							
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))											
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL			TOTAL	
APPLICATION AS AMENDED – PART II OTHER THAN (Column 1) (Column 2) (Column 3) SMALL ENTITY OR SMALL ENTITY											
AMENDMENT	10/13/2009	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1.18(1))	· 15	Minus	·· 20	= 0	ı	x \$ =		OR	X \$52=	0
	Independent (37 CFR 1.16(h))	• 3	Minus	3	= 0	1	x \$ =		OR	X \$220=	0
	Application Size Fee (37 CFR 1.16(s))										
1	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR		
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0
(Column 1) (Column 2) (Column 3)											
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1.160))		Minus	**		i	x \$ =		OR	x s =	
	Independent (37 CFR 1.16(h))		Minus	***	-		x \$ =		OR	x s =	
Ä	Application Size Fee (37 CFR 1.16(s))								ı		
AM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))					1			OR		
									OR	TOTAL ADD'L FEE	
If the entry in column 1 is less than the entry in column 2, write 0" in column 3.  If the "Highest Number Prevously Paid For IN THIS SPACE is less than 80, enter "20".  If the "Highest Number Prevously Paid For IN THIS SPACE is less than 3, enter "3".  If the "Highest Number Prevously Paid For IN THIS SPACE is less than 3, enter "3".  If the "Highest Number Prevously Paid For IN THIS SPACE is less than 3, enter "3".  If the "Highest Number Prevously Paid For IN THIS SPACE is less than 3, enter "3".  If the "Highest Number Prevously Paid For IN THIS SPACE is less than 10, enter "20".  If the "Highest Number Prevously Paid For IN THIS SPACE is less than 10, enter "20".  If the "Highest Number Prevously Paid For IN THIS SPACE is less than 10, enter "20".  If the "Highest Number Prevously Paid For IN THIS SPACE is less than 10, enter "20".  If the "Highest Number Prevously Paid For IN THIS SPACE is less than 3, enter "3".  If the "Highest Number Prevously Paid For IN THIS SPACE is less than 10, enter "20".  If the "Highest Number Prevously Paid For IN THIS SPACE is less than 3, enter "3".  If the "Highest Number Prevously Paid For IN THIS SPACE is less than 3, enter "3".  If the "Highest Number Prevously Paid For IN THIS SPACE is less than 3, enter "3".  If the "Highest Number Prevously Paid For IN THIS SPACE is less than 3, enter "3".  If the "Highest Number Prevously Paid For IN THIS SPACE is less than 3, enter "3".  If the "Highest Number Prevously Paid For IN THIS SPACE is less than 3, enter "3".  If the "Highest Number Prevously Paid For IN THIS SPACE is less than 3, enter "3".  If the "Highest Number Prevously Paid For IN THIS SPACE is less than 3, enter "3".  If the "Highest Number Prevously Paid For IN THIS SPACE is less than 3, enter "3".  If the "Highest Number Prevously Paid For IN THIS SPACE is less than 3, enter "3".  If the "Highest Number Prevously Paid For IN THIS SPACE is less than 3, enter "3".  If the "Highest Number Prevously Paid For IN THIS SPACE is less than 3, enter "3".  If the "Highest Nu											

This collection of information is equated by 37 CER 1.10. The information is required to obtain or retain a benefit by the public which is in Sife (and by the USETO to noceess) an implication. Confidentiality is governed by 85 US of 22 and 37 CER 1.4. This collection is estimated to state 2 relativeste to complete in excluding patternity, preparing, and submitting the completed application form to the USETO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or segregations form doubling this burden, subsuld be sent to the CEMPT (information Officer, U.S. Fatterni and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS SEND TO C. Commissionment for Patternity, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS SEND TO C. Commissionment for Patternity, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS.